DECLARATION FOR UTILITY OR

DESIGN PATENT APPLICATION Sheng-Shiou Yeh

COMPLETE IF KNOWN

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

First Named Inventor

(37 CFI	Application Nun	nber							
E badanda - E	7	Filing Date							
Declaration [Submitted OR with Initial	 Declaration Submitted after Initial Filing (surcharge 	Group Art Unit							
Filing	(37 CFR 1.16 (e)) required)	Examiner Name							
As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural									
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
COLOR FILTER AND METHOD FOR MANUFACTURING THE SAME									
the specification of which (Title of the Investigal)									
is attached hereto									
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.									
centificate, or 365(a) of any f	y benefits under 35 U.S.C. 1° CT international application	which designated at lea	st one country	other than the U	nited States of				
America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Bring Service April 2010		Facility Pills - Oaks	Priority	Cartillad Ca	py Attached?				
Prior Foreign Application Number(s)	Country	Foreign Filling Date (MM/DD/YYYY)	Not Claimed	YES	NO NO				
92104339	Taiwan	Feb/27/03		□x					
					님 !				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: ! hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s) Filing Date (MM/DD/YYYY)									
]		Additional provisional application					
			ers are listed or emental priority						
			B/02B attache						

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

			$\overline{}$	
Please type	a of	s sign (+) inside this box	 +	

City

PTO/SB/01 (12:97)

Approved for use through 9/30/00. OMB 0651-0012
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Fatent and Trademark Unice; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains

DECLARATION — Utility or Design Patent Application I nereby claim the benefit under 35 IJ.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Number Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/029 attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Paten and Trademark Office connected therewith: 🔀 Customer Number Place Customer Number Bar Cade Registered practitioner(s) name/registration number listed below Registration Registration Name Name Number Number Additional recistered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/S8/02C attached hereto. Direct all correspondence to: 😡 Customer Number 25859 OR Correspondence address below or Bar Code Lacel Name Address Address City State Z:P Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the Name of Sole or First Inventor. A petition has been filed for this unsigned inventor Given Name (first and middle (if anvi) Family Name or Surname Sheng-Shiou Yeh Inventor's Signature 02/15/04 Oate Miao-Li Residence: City State Taiwan Country Citizenship Taiwah 1650 Memorex Drive Post Office Address Post Office Address

95050

U.S.A.

Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached herete

CA

Clara State

Santa

 \square Additional inventors are being named on the 1

PTO/S8/02A (3-97)

Approved for use through 9/30/98. CMB 0651-0032

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1 of 1

Name of Additi	onal Joint Inventor	, if any:			A pet	ition has been fi	led for t	his unsigned	inventor
Given N	Given Name (first and middle [if any])								· inventor
Jia-Pang					Family Name or Sumame pang				
Inventor's Signature	PANG, JEA-PANG			6	<u></u>			Date	02/16/
Residence: City	Miao-Li	Sta	ite .		Country	Taiwan		Citizenship	Taiwan
Post Office Address	1650 Memorex Drive								
Post Office Address		•							
City	Santa Clar	1 900	te C	A	ZIP	95050	Country	U.S	.A.
	Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Family Name or Sumame									
		, •					_		
Inventor's Signature	Shing-Shion Yel							Date	
Residence: City	State Country .					Citizenship			
Post Office Address									
Post Office Address	ress								
City		State	,		ZIP		Country	,	
Name of Addition	al Joint Inventor, if	any:		ΠA	petition	has been filed	for this	unsigned inv	entor
Given Name (first and middle [if any]) Family Name or Sumame									
				·					
Inventor's Signature			-					Date	
Residence: City	•	State		Cou	intry			Citizenship	
ost Office Address	•		- • _		····/ <u> </u>		13	1	
ost Office Address									
ity		State			71P		Couri	ıriv	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.